

Please print or type.
The application must
be fully completed to
be considered. Please
complete each section,
even if you attach a
resume.

## **Application for Employment**

Personal I	nform	natic	on								
Name											
Address					City		State		Zip		
Phone Number	Phone Number Mobile Num				Email Address						
Are You A U.S. Citizen? Yes \( \square\) No \( \square\)					Have You Ever Been Convicted Of A Felony?  Yes □ No □						
If Selected, Are You Willing to Submit to a Pre-Employment Drug Screening Test? Bilingual?  Yes   No   No											
Position											
Position You Are Applying For Cashiers must be 18 years of age or older Bussers must be 16 years of age or older					Available Start Date					Desired Pay	
Employment Desired				,	☐ Part Time ☐ Seasonal/Temporary						
Shift Avai	labilit	y									
From	Monda	ay	Tuesday	W	ednesday	Thursda	ıy	Friday	Satu	ırday	Sunday
То											
Overnight											
Education		·									
School Name			Location		Years Attended		Degree Received		Major		
Language	es Sp	okei	n								

References									
Name	Title	Company	Phone						
<b>Employment History</b>									
Employer (1)	Job Title	Dates Employed							
Work Phone	Starting Pay Rate	Ending Pay Rate							
Address	City	State	Zip						
Employer (2)	Job Title	Dates Employed							
Work Phone	Starting Pay Rate	Ending Pay Rate							
Address	City	State	Zip						
Employer (3)	Job Title	Dates Employed							
Work Phone	Starting Pay Rate	Ending Pay Rate							
Address	City	State	Zip						
Signature Disclaimer									
I certify that my answers are true and complete If this application leads to employment, I under may result in my release.			plication or interview						
Name (Please Print)	Signature								
Date									